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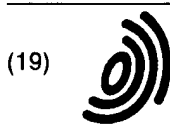
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(54) **Medical gown with an adhesive closure**
Medizinisches Gewand mit Klebeverschluss
Blouse médicale avec fermeture adhésive

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US-A- 4 040 124 **US-A- 4 674 132**

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Description

THE FIELD OF THE INVENTION

[0001] The present invention relates to medical gowns, and more particularly to medical gowns having adhesive closures.

BACKGROUND OF THE INVENTION

[0002] Medical gowns are typically closed with ties. They are open at the back and a tie is provided across the two back panels of the gown at the waist. Ties may also be provided inside the gown at the waist (similar to the inside button of a double-breasted suit) and at the neck. To avoid having the ties touch a nonsterile hands, they are sometimes attached to a transfer card which can be passed to an assistant by the sterile wearer, whereby the assistant may pass at least one of the ties around the wearer's waist touching only the card. The wearer then grasps the tie, the card is removed and the wearer ties the ties. The assistant need not be sterile. The Allen, Jr. et al. U.S. Patent No. 3,935,596 issued February 3, 1976, and incorporated herein by reference, discloses such a method.

[0003] Ties with a transfer card are cumbersome to assemble and medical gowns, particularly disposable medical gowns, must be produced at low cost.

[0004] U.S. Patent No. 4,674,132 discloses a medical gown which can be donned without the assistance of a second party by providing a belt with adhesive strips on each side, thereby permitting the belt to be fastened temporarily to a sterile surface for donning the gown.

SUMMARY OF THE INVENTION

[0005] A medical gown according to the present invention comprises a body covering portion and sleeves extending from the body portion. The body portion has an opening for donning the gown and at least one closure for closing the opening. The closure comprises an adhesive on a first side of the opening and a region on the second side of the opening to which the adhesive attaches to close said opening.

[0006] Preferably, the body covering portion is formed of a nonwoven fabric. The adhesive may be printed directly onto the gown fabric on the first side, may comprise a piece of double-sided tape affixed to the first side, or other suitable method.

[0007] When the gown is sterile, the adhesive can be located on an a first side of an attachment portion of the gown with a removable member on a second side of the attachment portion. Thus a non-sterile hand may press against the removable member to adhere the adhesive to the second side and then remove the removable member leaving a wholly sterile gown. The removable member can comprise a release member removably placed over the adhesive.

[0008] Preferably indicia indicating a sequence of steps for applying said closure in a sterile fashion are provided.

[0009] The closure may further comprise a removable member adjacent the opening for manipulating the closure into position for adhering the adhesive and the gown, whereby a nonsterile hand may place closure in such position and then remove the removable means to leave a sterile closed gown.

[0010] A method according to the present invention for closing a medical gown comprises the steps of exposing an adhesive on a first side of an opening in the gown, and attaching the adhesive to a location on a second side of the opening.

BRIEF DESCRIPTION OF THE FIGURES

[0011]

FIG. 1 is a front elevational view of a gown according to the present invention;

FIG. 2 is a rear elevational view of the gown of FIG. 1;

FIG. 3 is a sectional view taken along lines 3--3 of FIG. 2, illustrating a gown closure;

FIG. 4 is a sectional view taken along lines 4--4 of FIG. 3;

FIG. 5 is a partially exploded perspective view of the closure of FIG. 3;

FIG. 6 is a sectional view taken along lines 6--6 of FIG. 3;

FIGS. 7 to 10 are sectional views similar to FIG. 6 illustrating operation of the closure;

FIG. 11 is a rear elevational view of the gown of FIG. 2, shown closed;

FIG. 12 is a rear elevational view of a further embodiment of a gown according to the present invention;

FIGS. 13 to 16 are sectional views through a waist closure of the gown of FIG. 12, showing its operation;

FIG. 17 is a rear elevational view of the gown of FIG. 12 shown closed; and

FIG. 18 is a detail in perspective view a neck closure on the gown of FIG. 12.

DETAILED DESCRIPTION

[0012] FIG. 1 illustrates a medical gown 10 according to the present invention. It comprises a body 12 having a front portion 14 and back portion 16 and a pair of sleeves 18. The body and sleeves are formed of a suitable nonwoven material to provide a disposable gown; however, a reusable fabric such as cotton may also be employed. Preferably such material is breathable allowing transpiration of air and water vapor to improve the comfort of the wearer. Suitable fabrics include polyester-wood pulp hydro-entangled nonwovens treated with fluorocarbons to enhance repellency, such as FABRIC 450, from Johnson & Johnson Medical, Inc. and SON-TARA available from DuPont. The back portion 16 may be formed of less substantial and untreated fabrics. For instance, the front portion 14 preferably exhibits a repellency of between 20 and 30 cm static head, most preferably about 25 cm, but the back portion 16 can be less than 20, and preferably about 10 to lower cost and enhance overall breathability of the gown.

[0013] AATCC Test Method 127-1989 measures the resistance of fabrics to the penetration of water under static pressure, with the water column being measured in centimeters. Test specimens are mounted under the orifice of a conical well and are subjected to water pressure increasing at a constant rate (1 cm/sec) until three points of leakage occur through the fabric. The ASTM Emergency Standard 21 and 22 define imperviousness for medical gowns. One side of a test sample of fabric is exposed to synthetic blood medium (with a bacteriophage for method 22). Pressure is applied across the test sample of the fabric on the following schedule: 5 minutes at atmospheric pressure (on both sides of the fabric), one minute with 2 psi applied to the fluid side of the fabric, the other side remaining at atmospheric pressure, followed by 54 minutes with both sides at atmospheric pressure.

[0014] FIG. 2 shows the back of the gown 10 and a taped type neck closure 30 and waist closure 32. The neck closure 30 comprises a tab 34 coated with an adhesive and overlaid with a release liner 36, such as siliconized paper. To adhere the neck closure 30, the release liner 36 is removed and the tab 34 is folded over and attached to the gown back 16. Alternatively, an area of the gown back 16 at the neck 24 may be coated with an adhesive and have a release liner (not shown in FIG. 2) attached thereover. Closure can then be effected by removing the release liner and adhering the two sides of the gown back 16 together at the adhesive.

[0015] FIGS. 3 to 5 illustrate the waist closure 32 in more detail. The gown 10 has an opening 38 in the back 16. A first edge 40 and second edge 42 are connected to each other to effect closure. The waist closure 32 comprises a first adhesive layer 44 on an inside surface 46 of the gown back 16 at the first edge 40. A release material 48 is applied to an opposite surface 50 in registry with the first adhesive layer 44. The release surface

48 may comprise a release liner 52 adhered to the outside surface 50 with an adhesive 54. A special release strip 56 covers the first adhesive layer 44 and aids in applying the waist closure 32 in a sterile fashion. The release strip 56 is formed of a long strip of release liner 58 having one end thereof folded over to form a tab 60. From the tab 60 the release liner 58 extends across the first adhesive layer 44, and round the first edge 40. Adhesive 62 on the release liner 58 adheres to the release surface 48 on the outside surface 50. The release liner 58 terminates in a bi-fold tab 64 wherein the release liner first folds away from the release surface 48 and then back upon itself to cover the adhesive 62.

[0016] The release strip 56 bears indicia to indicate the steps in the sterile application of the waist closure 32. For instance, the tab 60 bears an indicia 66, such as the numeral "1", indicating that the first step in the application of the waist closure 32 is to pull the tab 60 and release the release strip 56 from the first adhesive layer 44. A second indicia 68, such as the numeral "2", appears on the release strip where it covers the release surface 48 and a third indicia 70, such as the numeral "3", appears on the bi-fold tab 64.

[0017] FIGS. 6 to 10 illustrate the procedure for applying the waist closure 32. First, the user grasps tab 60 to remove the release strip 56 from the first adhesive layer 44, as illustrated in FIG. 7. This procedure may be performed with a non-sterile hand and still effect sterile closure of the waist closure 32 as will be illustrated. By holding the tab 60, the first adhesive layer 44 may be properly positioned over the gown back 16 adjacent the second edge 42. By applying pressure at the second indicia 68, such as with a finger, the first adhesive layer 44 is adhered to the gown back 16. Finally, the bi-fold tab 64 is grasped, and the release strip 56 is removed and discarded. During the procedure only the release strip 56, which is discarded, is touched with non-sterile hands. The final closure is illustrated in FIG. 11.

[0018] FIG. 12 illustrates a gown 98 having alternative neck and waist closures 100 and 102. An opening 104 extends up the back 106 of the gown to provide left and right back panels 108 and 110. The right back panel 110 is folded over outwardly along its length forming a flap 112. A region of adhesive 114 is provided on the flap 112 near the gown's neck 116. This may be printed thereon, preferably simultaneously or contemporaneously with the repellent coatings to speed construction of the gown 98, or may comprise a double-faced tape. A release liner 118 with a free-end tab 120 covers the adhesive 114. The neck closure 100 operates by removing the release liner 118 by means of the tab 120 and then folding the flap 112 at the region of the adhesive 114 over onto the left back panel 108 where the adhesive 114 adheres the two back panels 108 and 110 together. See also FIG. 18.

[0019] The waist closure 102 has a pass-off feature which achieves an effect similar to pass-off cards used on some surgical gowns with ties at the waist. With these

gowns, the ties are attached to a card which is passed by a wearer to an assistant, who need not be sterile, merely clean. The assistant then passes one of the ties around the wearer's torso touching only the card. The wearer then grasps the tie and the non-sterile tie is removed.

[0020] The closure 102 comprises a strip 122, which preferably is formed of the same material as the gown 98, and which extends laterally from a first end 124 thereof attached to the flap 112 to a second end 126 attached at the side 128 of the gown 98. A face 130 of the strip 122 which faces outwardly bears an adhesive with a release liner 132 thereover. The release liner similarly has a first end 134 and a second end 136, corresponding to the strip first and second ends 124 and 126. The release liner first end 134 extends slightly from the adhesive to form a tab 138 and the second end 136 is releasably attached to the strip second end 126, but with significantly greater force than the attraction between the adhesive and the release liner 132. For instance, it may be physically attached thereto, such as by stapling, or bonded with a stronger adhesive.

[0021] FIGS. 13 to 16, illustrate operation of the closure 102. First, the wearer's assistant grasps the tab 138 and lifts the release liner 132 away from the strip 122, except where the two join at their second ends 126 and 136. While holding only the release liner 132, the assistant passes the strip second end 126 behind the wearer's back to a location 140 at the side or front of the gown 98. The wearer, with sterile hands, presses only against the strip 122 to adhere the strip 122 to the gown 98 and effect closure. The assistant then removes the release liner 132. The wearer never touches the release liner 132, and the assistant touches only the release liner 132. FIG. 17 shows the closed gown 98 and FIG. 18 illustrates the neck closure 100, described above, in more detail. In any of the adhesive closures, an acrylic adhesive is preferred, but substitutions therefor will be apparent to those of skill in the art. Such substitutions could also include hook and loop closures.

[0022] Various modifications and alterations of this invention will be apparent to those skilled in the art without departing from the scope and spirit of this invention. It should be understood that the invention is not limited to the embodiments disclosed herein, and that the claims should be interpreted as broadly as the prior art allows. For instance those of skill in the art can find suitable alternatives to the specific performance enhancing coatings described herein without undue experimentation.

Claims

1. A medical gown (10) comprising:

a body covering portion (12); and
sleeves (18) extending from the body covering portion (12),

wherein:

the medical gown (10) is sterile;
the body covering portion (12) has an opening (38) for donning the medical gown (10) and at least one closure (30,32) for closing the opening (38);
the closure (30,32) comprises an adhesive (44) on a first side of the opening (38) and a region on the second side of the opening (38) to which the adhesive (44) attaches to close said opening (38); and
the adhesive (44) is overlaid with a release liner (58) and is located on a first side of an attachment portion of the medical gown (10),

characterised in that:

the release liner (58) forms a removable member (56,58,60,64) on a second side of the attachment portion;
the first side of the attachment portion is an inside surface of the medical gown (10);
the second side of the attachment portion is an outside surface of the medical gown (10); and
the removable member (56,58,60,64) is folded, thereby providing a tab (60,64), whereby a non-sterile hand may press against the removable member (56,58,60,64) to adhere the adhesive (44) to the second side of the opening and then remove the removable member (54,58,60,64) leaving a wholly sterile medical gown (10).

2. A medical gown (10) according to claim 1 wherein the body covering portion (12) is formed of a non-woven fabric.
3. A medical gown (10) according to claim 2 wherein the adhesive (44) is printed directly onto the gown fabric on the first side of the opening.
4. A medical gown (10) according to claim 2 wherein the adhesive (44) comprises a piece of double-sided tape affixed to the first side of the opening.
5. A medical gown (10) according to claim 5 wherein the at least one closure (30,32) further comprises indicia indicating a sequence of steps for applying said closure (30,32) in a sterile fashion.
6. A medical gown (10) according to claim 1 wherein the at least one closure (30,32) further comprises indicia indicating a sequence of steps for applying said closure in a sterile fashion.

Patentansprüche**1. Medizinisches Kleid (10), mit:**

einem Körperabdeckabschnitt (12); und

Ärmeln (18), die sich von dem Körperabdeckabschnitt (12) erstrecken,

wobei:

das medizinische Kleid (10) steril ist;

der Körperabdeckabschnitt (12) eine Öffnung (38) zum Anlegen des medizinischen Kleides (10) und wenigstens einen Verschluss (30, 32) zum Verschließen der Öffnung (38) aufweist;

der Verschluss (30, 32) ein Haftmittel (44) an einer ersten Seite der Öffnung (38) und einen Bereich auf der zweiten Seite der Öffnung (38) aufweist, an welchen das Haftmittel (44) haftet, um die Öffnung (38) zu schließen; und

das Haftmittel (44) mit einem Lösestück (58) überlegt ist, und an einer ersten Seite eines Anbringabschnitts des medizinischen Kleides (10) angeordnet ist,

dadurch gekennzeichnet, dass:

das Lösestück (58) ein entfernbares Element (56, 58, 60, 64) an einer zweiten Seite des Anbringabschnitts bildet; die erste Seite des Anbringabschnitts eine Innenfläche des medizinischen Kleides (10) ist;

die zweite Seite des Anbringabschnitts eine Außenfläche des medizinischen Kleides (10) ist; und

das entfernbares Element (56, 58, 60, 64) gefaltet ist, wodurch eine Lasche (60, 64) geschaffen wird,

wobei eine nicht sterile Hand gegen das entfernbares Element (56, 58, 60, 64) drücken kann, um das Haftmittel (44) an die zweite Seite der Öffnung anzubringen, und dann das entfernbares Element (56, 58, 60, 64) zu entfernen, wodurch ein vollständig steriles medizinisches Kleid (10) zurückgelassen wird.

2. Medizinisches Kleid (10) nach Anspruch 1, wobei der Körperabdeckabschnitt (12) aus einem Vliesstoff gebildet ist.**3. Medizinisches Kleid (10) nach Anspruch 2, wobei**

das Haftmittel (44) unmittelbar an den Kleidstoff an der ersten Seite der Öffnung gedruckt ist.

4. Medizinisches Kleid (10) nach Anspruch 2, wobei das Haftmittel (44) ein Stück eines doppelseitigen Bandes aufweist, das an die erste Seite der Öffnung befestigt ist.**5. Medizinisches Kleid (10) nach Anspruch 5, wobei der wenigstens eine Verschluss (30, 32) ferner einen Stempel aufweist, der eine Schrittfolge zum Anbringen des Verschlusses (30, 32) in steriler Art und Weise anzeigt.****6. Medizinisches Kleid (10) nach Anspruch 1, wobei der wenigstens eine Verschluss (30, 32) ferner einen Stempel aufweist, der eine Schrittfolge zum Aufbringen des Verschlusses in steriler Art und Weise anzeigt.****Revendications****1. Blouse à usage médical (10) comprenant :**

une partie (12) de couverture du corps ; et des manches (15) qui s'étendent à partir de la partie (12) de couverture du corps, dans laquelle :

la blouse à usage médical (10) est stérile ; la partie (12) de couverture du corps comporte une ouverture (38) pour enfiler la blouse à usage médical (10) et au moins une fermeture (30, 32) pour fermer l'ouverture ; la fermeture (30, 32) comprend un adhésif (44) sur un premier côté de l'ouverture (38) et une zone, sur le second côté de l'ouverture (38), sur laquelle s'attache l'adhésif (44) pour fermer ladite ouverture (38) ; et l'adhésif (44) est recouvert au moyen d'un doublage détachable (58) et il est situé sur un premier côté d'une partie d'attache de la blouse à usage médical (10),

caractérisé en ce que :

le doublage détachable (58) constitue un élément amovible (56, 58, 60, 64) situé sur un second côté de la partie d'attache, le premier côté de la partie d'attache est une surface intérieure de la blouse médicale (10) ; le second côté de la partie d'attache est une surface extérieure de la blouse à usage médical (10) ; et l'élément amovible (56, 58, 60, 64) est replié, fournissant ainsi une patte (60, 64),

une main non stérile pouvant presser contre l'élément amovible (56, 58, 60, 64) pour faire adhérer l'adhésif (44) sur le second côté de l'ouverture, puis enlever l'élément amovible (56, 58, 50, 64) en laissant une blouse à usage médical (10) complètement stérile. 5

2. Blouse à usage médical (10) selon la revendication 1, dans laquelle la partie (12) de couverture du corps est constituée d'un textile non tissé. 10
3. Blouse à usage médical (10) selon la revendication 2, dans laquelle l'adhésif (44) est imprimé directement sur le textile de la blouse situé sur le premier côté de l'ouverture. 15
4. Blouse à usage médical (10) selon la revendication 2, dans laquelle l'adhésif (44) comprend un morceau de ruban double face fixé au premier côté de l'ouverture. 20
5. Blouse à usage médical (10) selon la revendication 5, dans laquelle au moins une fermeture (30, 32) comporte, en outre, des données indiquant une série d'opérations destinées à l'application de ladite fermeture (30, 32) de manière stérile. 25
6. Blouse à usage médical (10) selon la revendication 1, dans laquelle au moins une fermeture (30, 32) comprend, en outre, des données indiquant une série d'opérations destinées à l'utilisation de ladite fermeture de manière stérile. 30

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FIG. 1

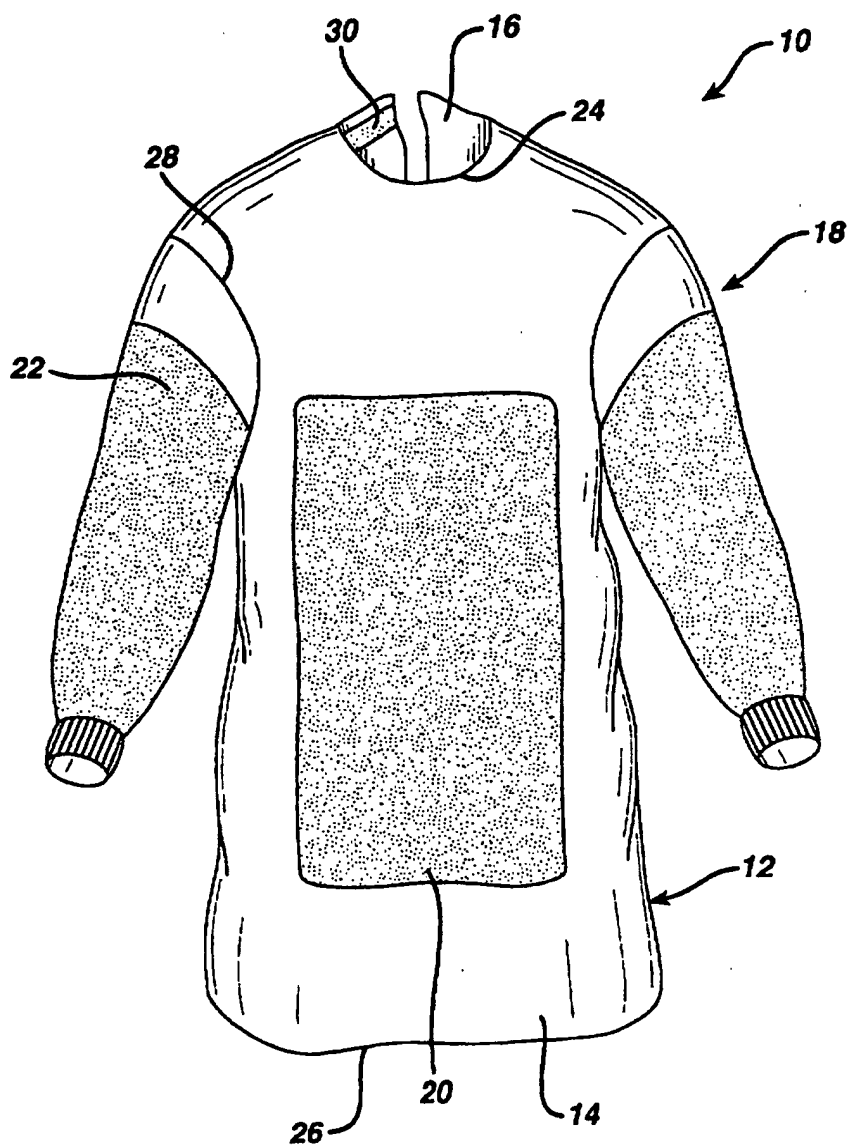
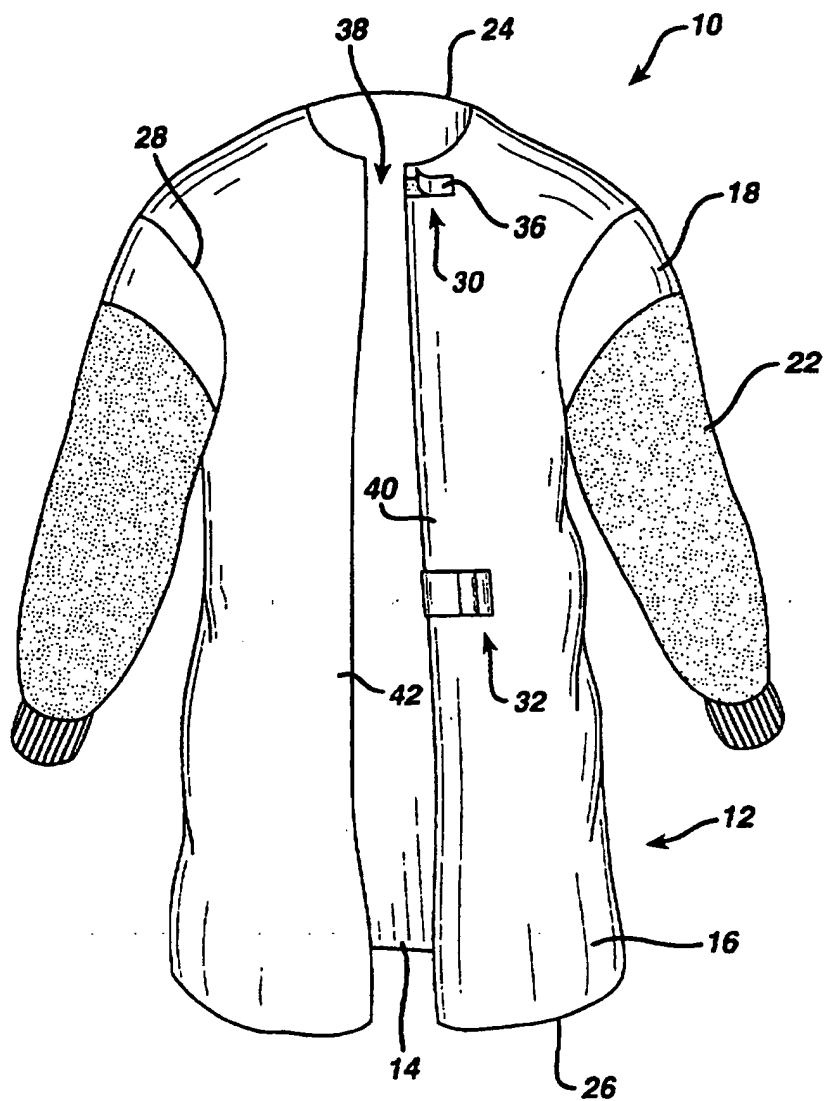


FIG. 2



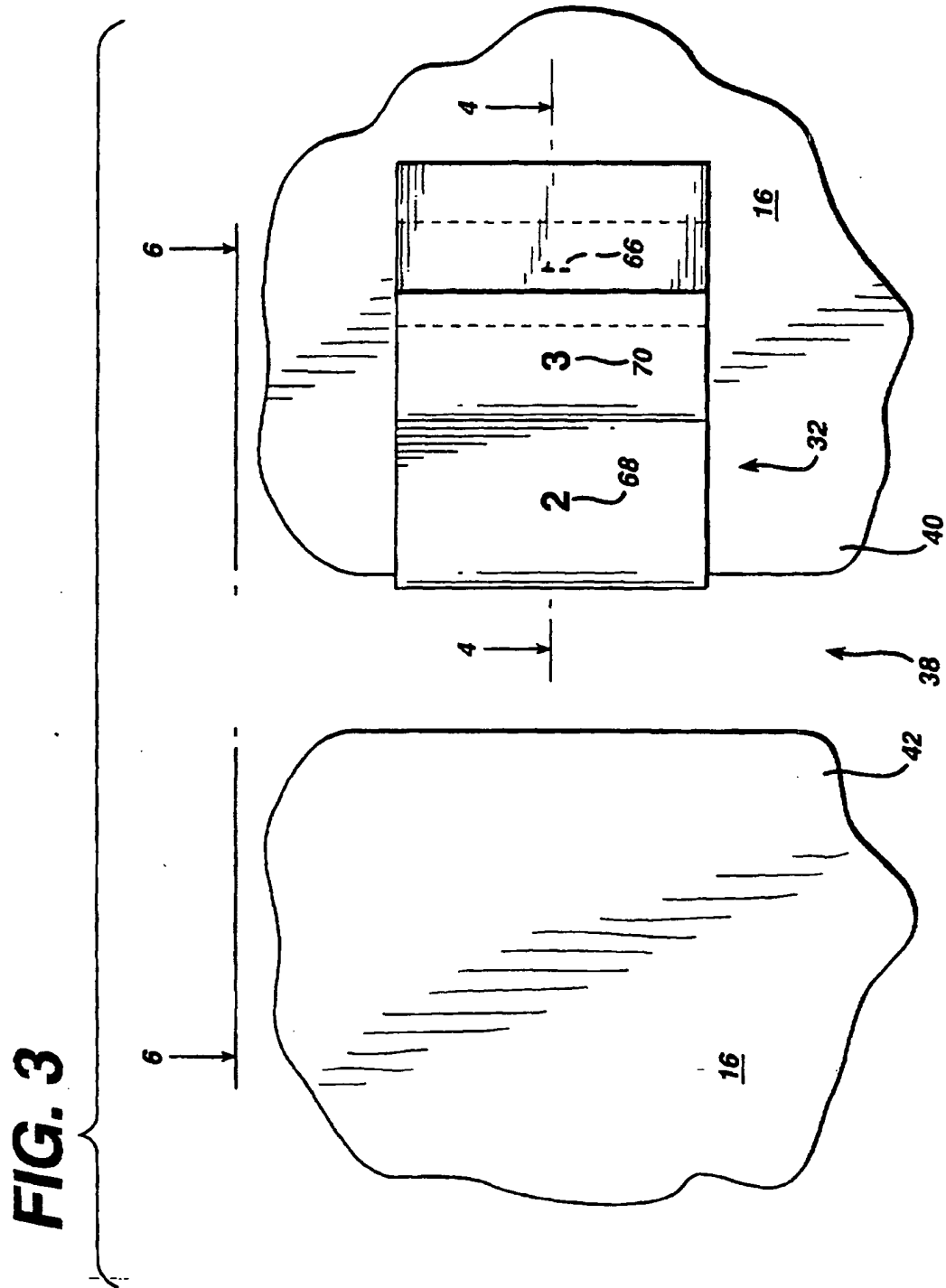
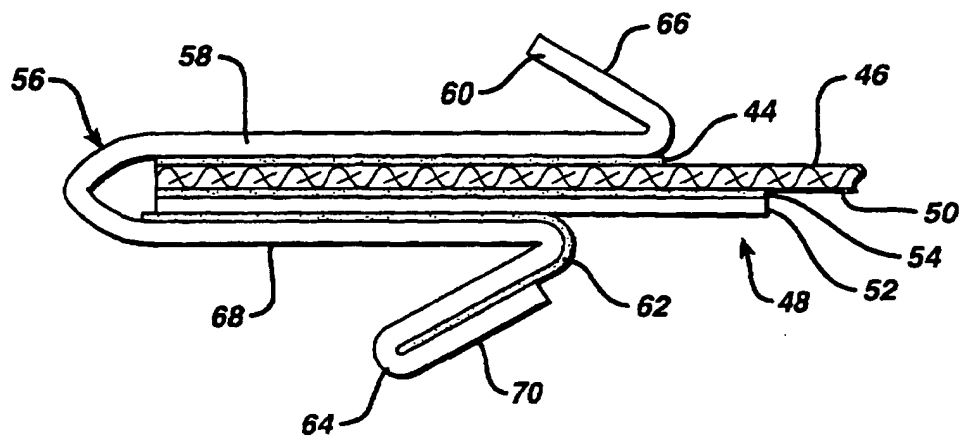


FIG. 4



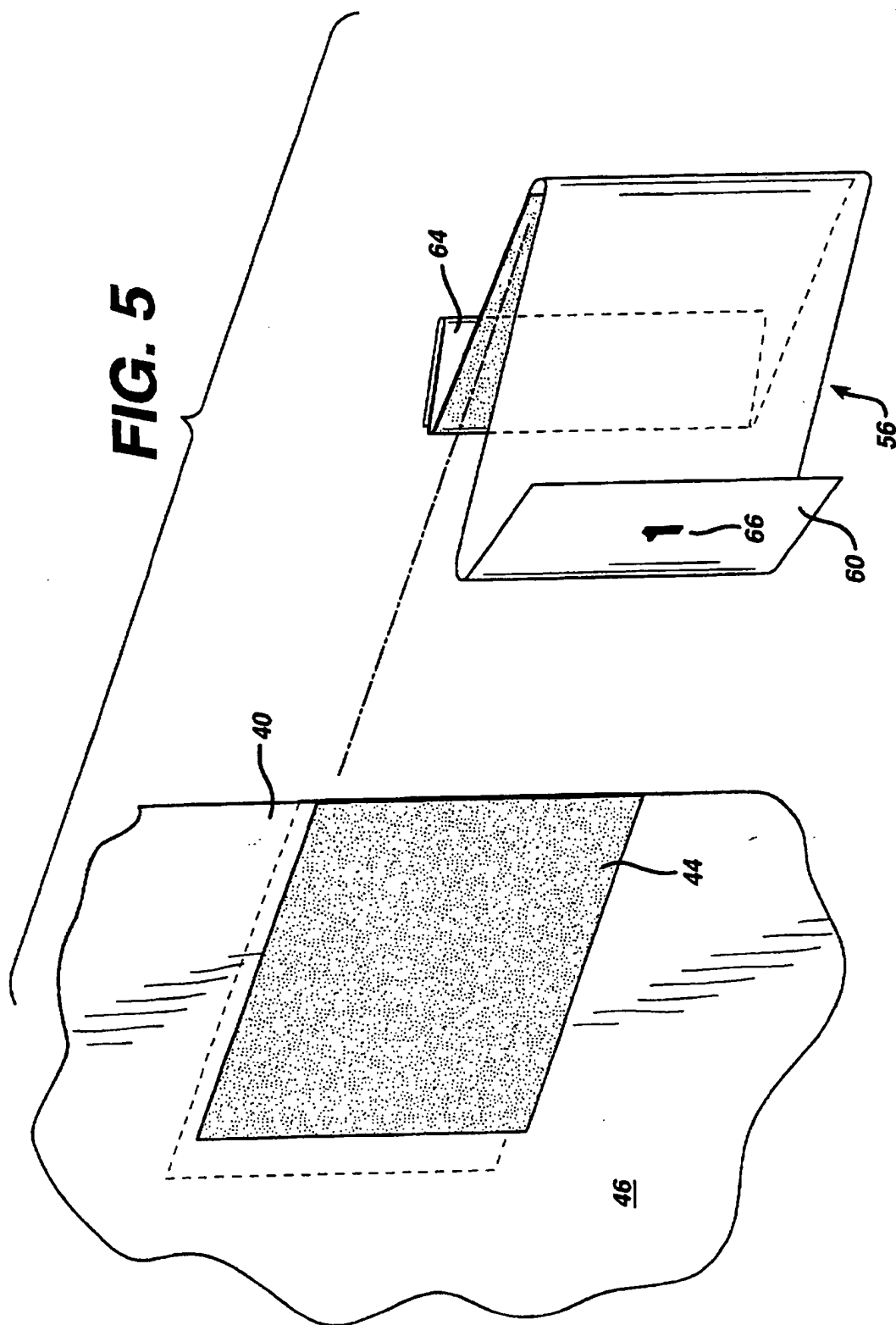


FIG. 6

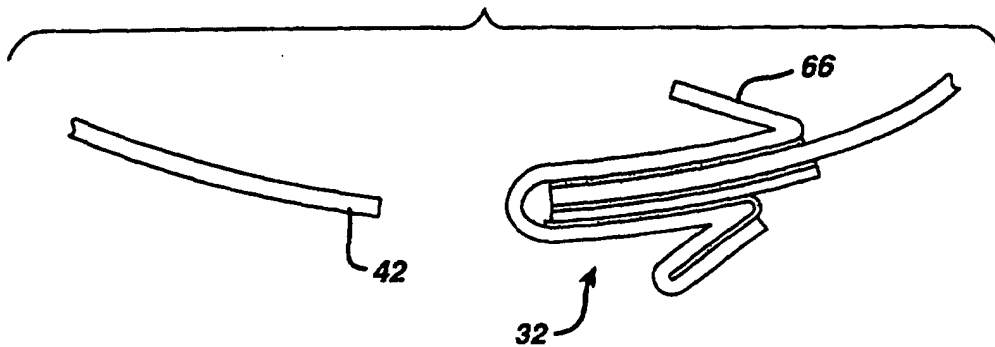


FIG. 7

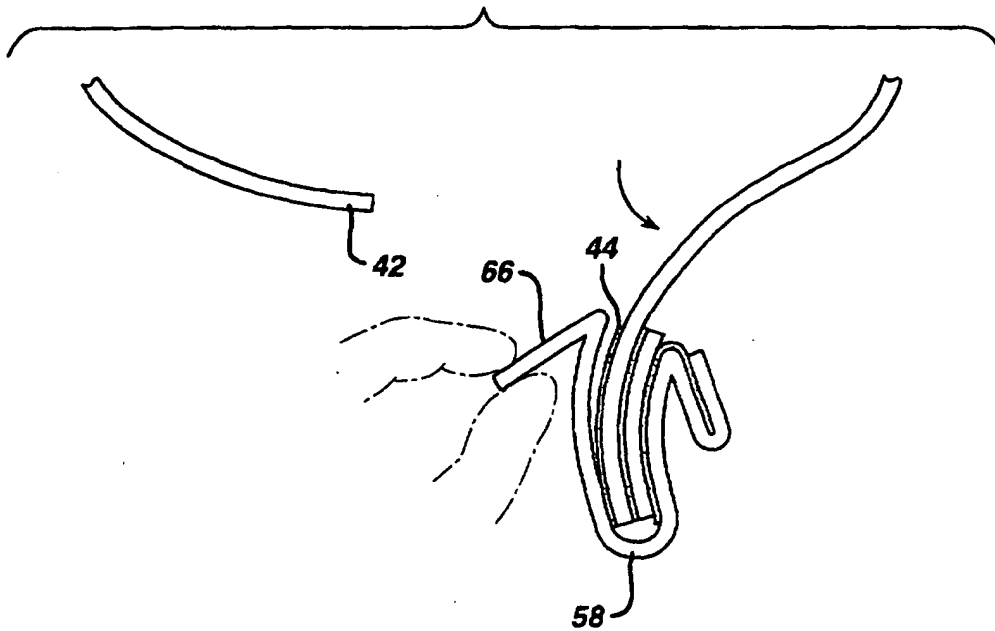


FIG. 8

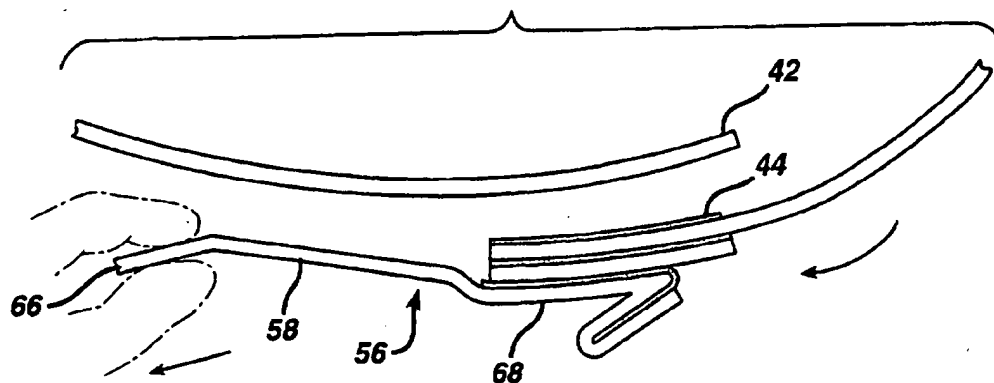


FIG. 9

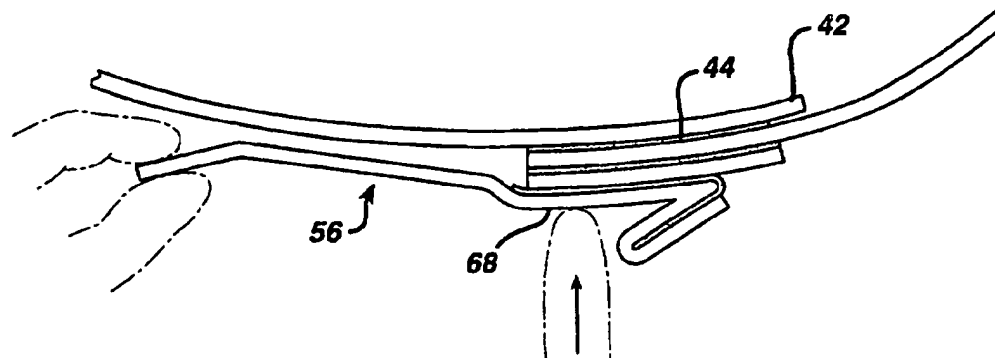


FIG. 10

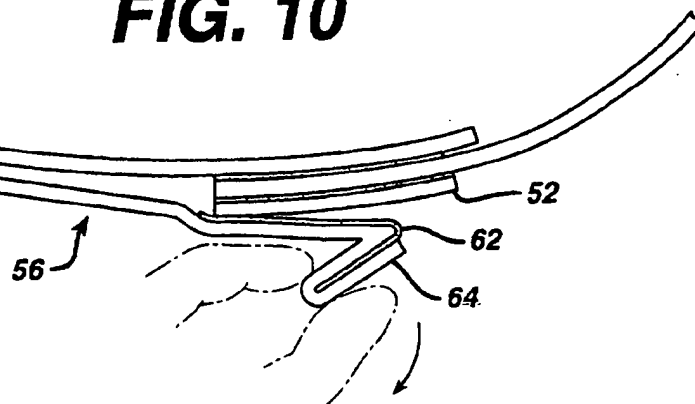


FIG. 11

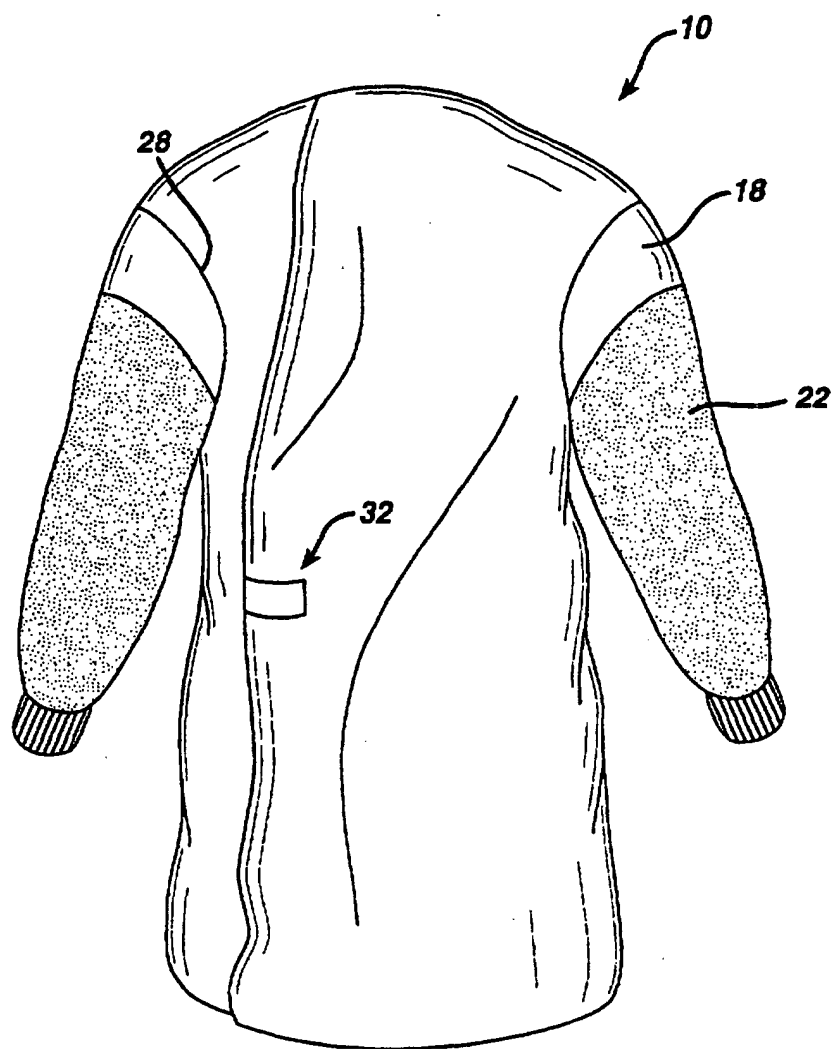


FIG. 12

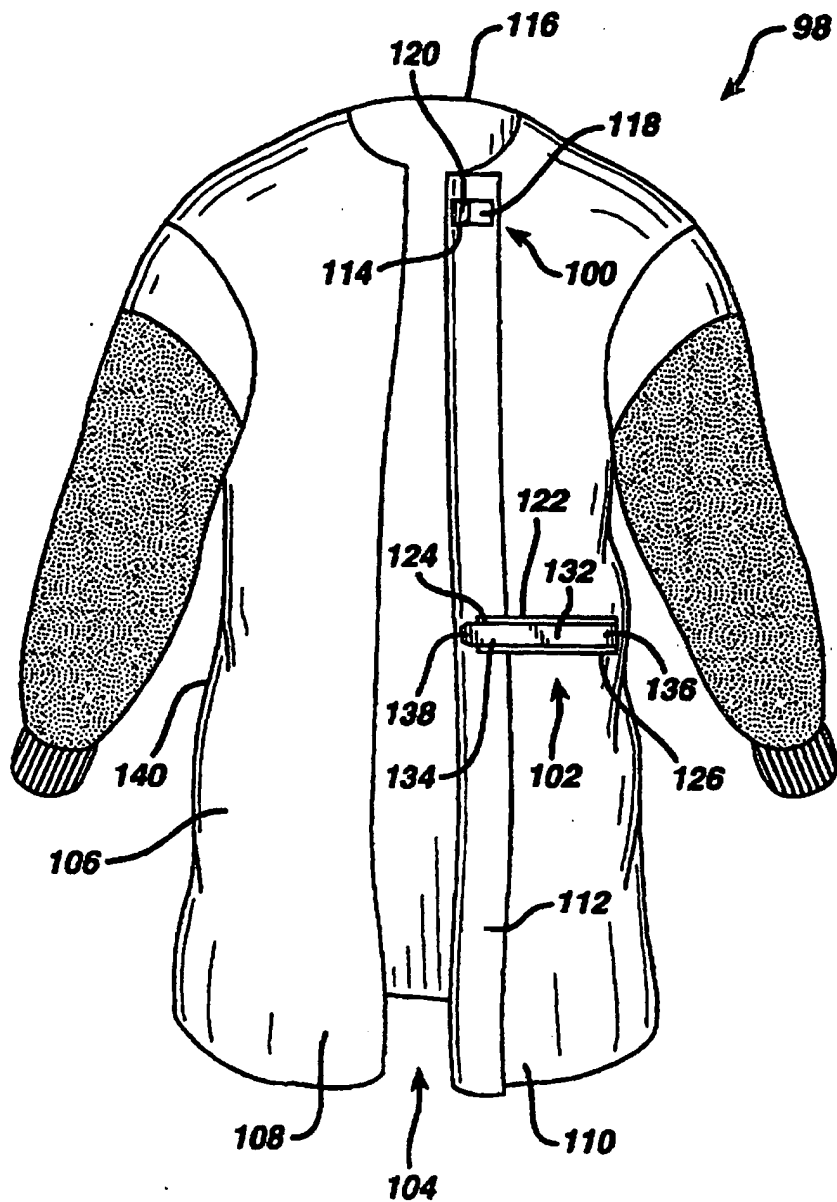


FIG. 13

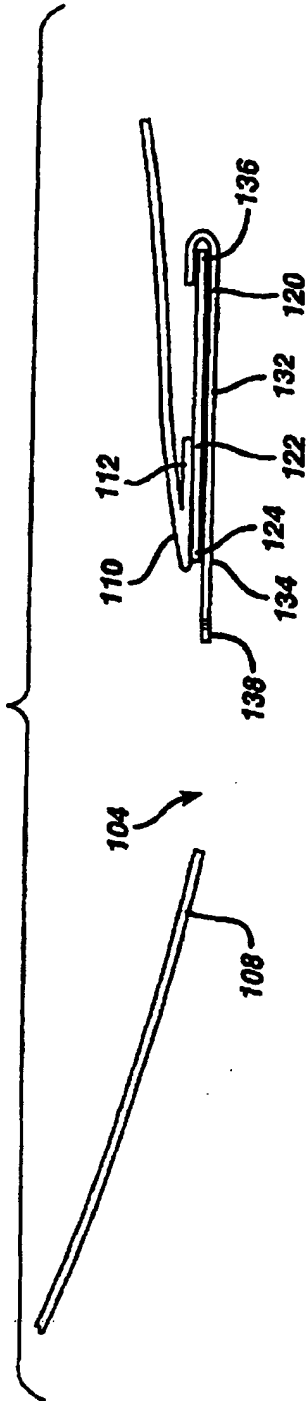


FIG. 14

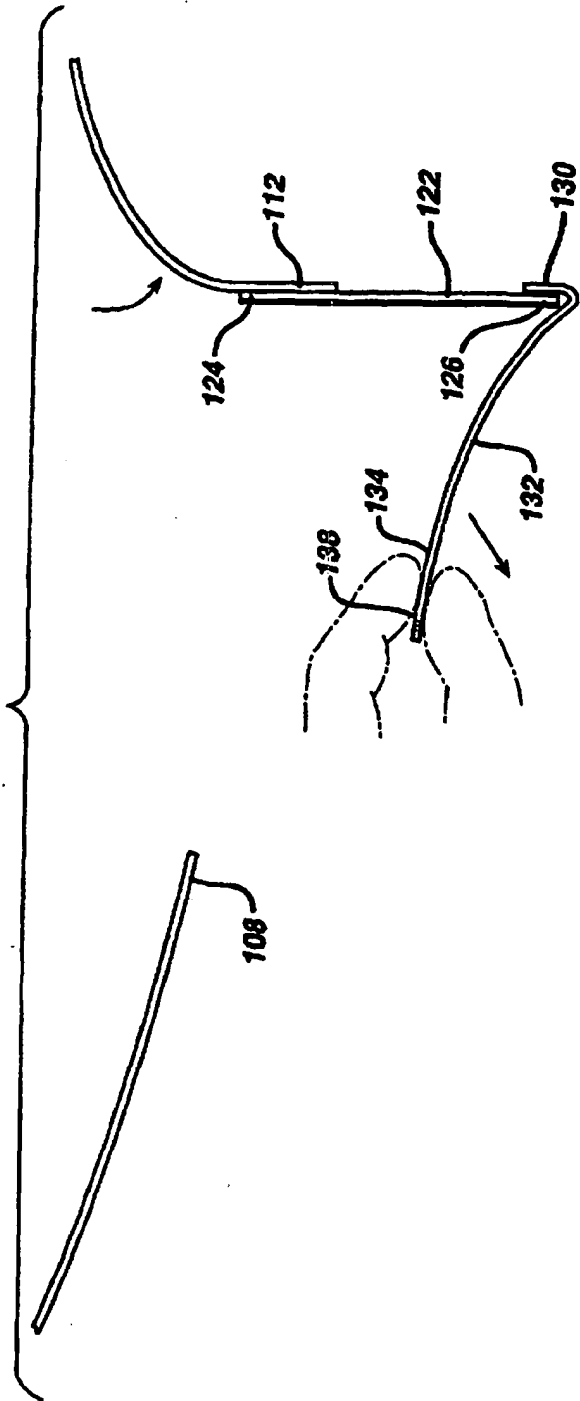


FIG. 15

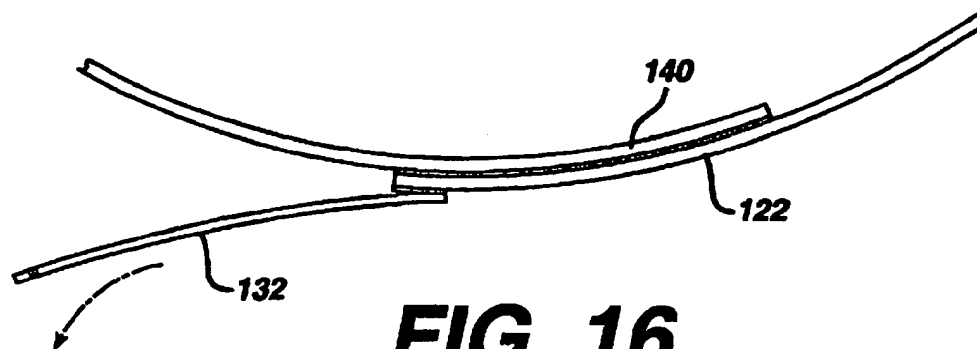
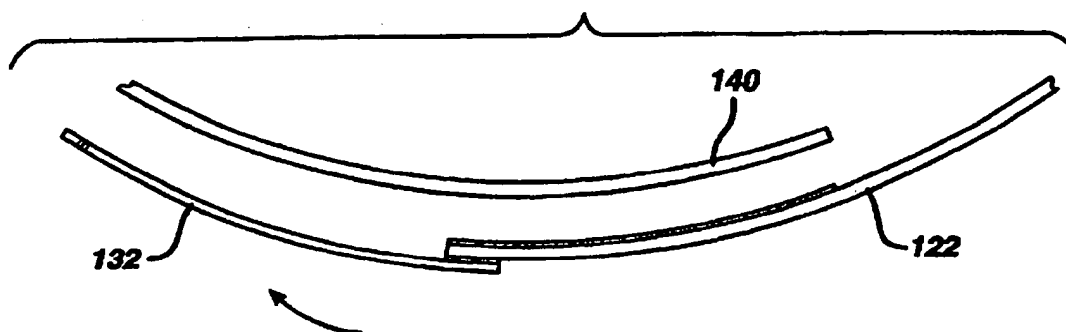


FIG. 16

FIG. 17

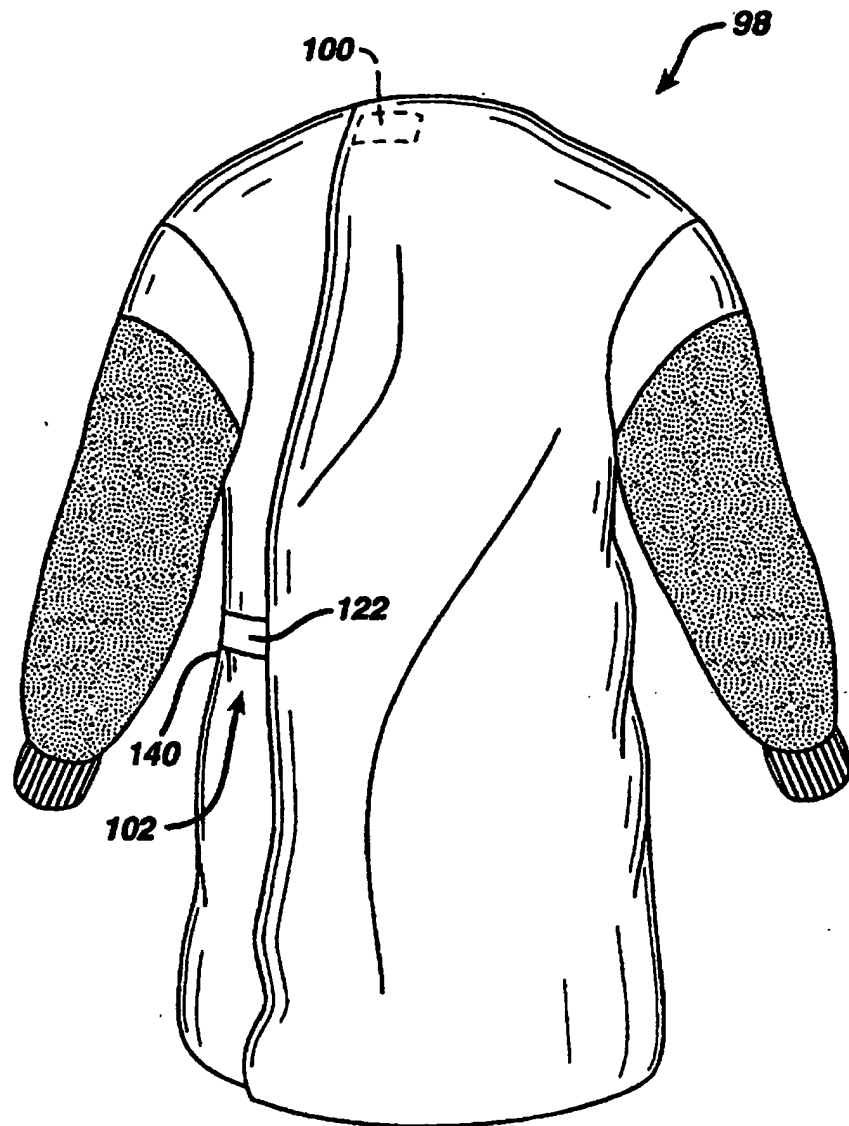


FIG. 18

